

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS773HSNF	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/01/2009
NAME OF PROVIDER OR SUPPLIER DESERT LANE CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 660 DESERT LANE LAS VEGAS, NV 89106		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Z 000	<p>Initial Comments</p> <p>Surveyor: 26855</p> <p>This Statement of Deficiencies was generated as a result of complaint investigation conducted in your facility on 10/01/09, in accordance with Nevada Administrative Code, Chapter 449, Facilities for Skilled Nursing.</p> <p>Complaint #NV00022933 was substantiated with deficiencies cited. (See Tags # Z242, Z430, Z460, Z470, and Z474)</p> <p>A Plan of Correction (POC) must be submitted. The POC must relate to the care of all patients and prevent such occurrences in the future. The intended completion dates and the mechanism(s) established to assure ongoing compliance must be included.</p> <p>Monitoring visits may be imposed to ensure on-going compliance with regulatory requirements.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>The following deficiencies were identified:</p>	Z 000		
Z242 SS=D	<p>NAC 449.74471 Administration of Drugs</p> <p>3. A facility for skilled nursing shall ensure that patients are not subjected to significant errors in their medication and that the rate of error in the administration of medication is less than 5 percent.</p>	Z242		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Z242	Continued From page 1 This Regulation is not met as evidenced by: Surveyor: 26855 Based on interview, record review and document review the facility failed to ensure nursing staff administered prescribed medications according to physician's orders for one resident. (Resident #1) Severity: 2 Scope: 1	Z242			
Z430 SS=D	NAC 449.74531 Pharmaceutical Services 1. A facility for skilled nursing shall provide such pharmaceutical services, including, without limitation acquiring, receiving, dispensing and administering drugs and biologicals, as are required to meet the needs of the patients in the facility. The facility shall provide such drugs and biologicals as are needed or obtain them from qualified outside sources pursuant to NAC 449.74521. This Regulation is not met as evidenced by: Surveyor: 26855 Based on interview, record review and document review the facility failed to ensure a resident was administered prescribed medication necessary to meet the medical needs of the resident. (Resident #1) Severity: 2 Scope: 1	Z430			
Z460 SS=D	NAC 449.74537 Special Services A Facility for skilled nursing shall ensure that a patient in the facility receives the following special services if needed: 1. Injections. 2. Parenteral and enteral fluids. 3. Colostomy, ureterostomy and ileostomy care.	Z460			

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Z460	Continued From page 2 4. Tracheostomy care. 5. Tracheal suctioning. 6. Respiratory care. 7. Foot care. 8. Prostheses. This Regulation is not met as evidenced by: Surveyor: 26855 Based on interview, record review and document review the facility failed to ensure a resident received enteral tube feedings according to physician orders. (Resident #1) Severity: 2 Scope: 1	Z460			
Z470 SS=F	NAC 449.74539 Physical Environment 1. Provide a safe, functional, sanitary and comfortable environment for the patients in the facility, the members of its staff and members of the general public. This Regulation is not met as evidenced by: Surveyor: 26855 Based on observation, interview and document review the facility failed to ensure resident rooms, bathrooms and shower rooms were maintained in a sanitary condition and free from offensive odors and an accumulation of dirt, dust, rubbish and trash. Severity: 2 Scope: 3	Z470			
Z474 SS=F	NAC 449.74539 Physical Environment 5. Provide such housekeeping and maintenance services as are necessary to maintain a sanitary, orderly and comfortable environment; This Regulation is not met as evidenced by: Surveyor: 26855 Based on observation, interview and document	Z474			

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Z474	Continued From page 3 review the facility failed to provide adequate housekeeping services necessary to maintain a sanitary comfortable environment and prevent an accumulation of dirt, dust, rubbish and trash in resident rooms, bathrooms and shower rooms. Severity: 2 Scope: 3	Z474			

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